

MARCH 07, 2016 8:30 A.M.

JONES COUNTY BOARD OF COMMISSIONERS

REGULAR MEETING

JONES COUNTY AGRICULTURAL BUILDING, 110 MARKET STREET

TRENTON, NC 28585

MINUTES

COMMISSIONERS PRESENT:

Zack Koonce, Chairperson
Frank Emory, Vice-Chairperson
Mike Haddock, Commissioner
Joseph Wiggins, Commissioner
Sondra Ipock-Riggs, Commissioner

OFFICIALS PRESENT:

Franky J. Howard, County Manager
Angelica Hall, Clerk

COMMISSIONERS ABSENT:

The Chairperson called the meeting to order. Commissioner Mike Haddock gave the invocation. **MOTION** was made by Commissioner Frank Emory, seconded by Commissioner Sondra Ipock-Riggs, and unanimously carried **THAT** the agenda be **APPROVED** as presented.

MOTION made by Commissioner Sondra Ipock-Riggs, seconded by Commissioner Joseph Wiggins, and unanimously carried **THAT** the minutes for Regular Meeting on February 15, 2016 be **APPROVED**.

PUBLIC COMMENT PERIOD:

No Comment

1. JONES COUNTY EMS PARAMEDIC PINNING CEREMONY

Instructors at LCC requested a Pinning Ceremony as part of the Commissioners meeting for several of the EMS staff that completed the Paramedic level training and certification. The following staff received their Paramedic Pin and took the Oath: Timmy Pike, Carrisa Otis, Ryan Mills and James Holleman.

2. CHILD HEALTH FEES

Mr. Wesley Smith, Health Director, presented the Board with updated Clinic Fee Schedule to reflect up-to-date charges for Child Health services. At their meeting on January 28, 2016 the Jones County Board of Health approved the attached Additions/Revisions to Clinic Services Fee Schedule effective March 1, 2016. Commissioner Joseph Wiggins questioned why Mr. Smith used Craven and Lenoir, in-which Mr. Smith explained he used the bordering counties due to the fact that of all the counties parents were more than likely to have taken their children there for treatment. Commissioner Sondra Ipock-Riggs requested Mr. Smith look at the counties fees from similar counties such as Pamlico and Greene county. **MOTION** made by Commissioner Frank Emory seconded by Commissioner Mike Haddock and unanimously carried **THAT** the item Fee Schedule be **APPROVED** as presented. A copy of

this Fee Schedule is marked **EXHIBIT A** and is hereby incorporated and made a part of the minutes.

3. TRENTON VFD FIRE TRUCK LEASE PURCHASE AGREEMENT

Mr. Franky Howard presented the Board with the Formal agreement and Lease purchase agreement for the Trenton VFD Truck to include the VIN number. These items need to be approved to complete the closing which is to take place with Jones Onslow on Monday, March 14, 2016. **MOTION** made by Commissioner Joseph Wiggins seconded by Commissioner Sondra Ipock-Riggs and unanimously carried **THAT** the agreement be **APPROVED** as presented. A copy of this agreement is marked **EXHIBIT B** and is hereby incorporated and made a part of the minutes.

4. WATER LEAK ADJUSTMENT-POLICY

Mr. Franky Howard presented the Board with the Water Leak Adjustment Policy which was tabled last month. Mr. Howard explained to the Board that the County was among the few who actually allow a leak adjustment. The policy was reviewed due to a customer issue that was brought before the Board during last month's meeting. Mr. Howard explained to the Board that policy was not the issue, but was due to the fact that the JC Water Department did not leave a notice of why the customer's water was turned off and the customer turned the water back on, which caused the water to continue to leak and the bill continue to rise. Mr. Howard requested a full adjustment of the customer, Beverly Collin's December Bill of \$1904.67. Mr. Howard has requested Door Hangers be put on the doors of customers for communication purposes. **MOTION** made by Commissioner Mike Haddock seconded by Commissioner Frank Emory and unanimously carried **THAT** a full adjustment for Beverley Collins at 833 Spann Road, account number 002761 be **APPROVED** as presented.

5. SHIP CAPITAL REQUEST

Mr. Franky Howard presented the Board with a capital request for the SHIP program. No County funds will be used. **MOTION** made by Commissioner Frank Emory seconded by Commissioner Mike Haddock and unanimously carried **THAT** the capital request be **APPROVED** as presented. A copy of this request is marked **EXHIBIT C** and is hereby incorporated and made a part of the minutes.

6. BUDGET AMENDMENTS

Mr. Franky Howard presented the Board with the latest Budget Amendments from the Finance Office. **MOTION** made by Commissioner Sondra Ipock-Riggs seconded by Commissioner Frank Emory and unanimously carried **THAT** the Budget Amendments 2-5 be **APPROVED** as presented. A copy of this agreement is marked **EXHIBIT D** and is hereby incorporated and made a part of the minutes.

7. PRESENT USE VALUE APPLICATION

Mr. Franky Howard the Board with the latest Present Use Value applications from the Tax Office. **MOTION** made by Commissioner Joseph Wiggins seconded by Commissioner Frank Emory and unanimously carried **THAT** the applications be **APPROVED** as presented.

copy of this agreement is marked **EXHIBIT E** and is hereby incorporated and made a part of the minutes.

8. USDA COMMODITIES PROGRAM

Mr. Franky Howard presented the Board with a request to approve shifting the USDA Commodities Program to the Salvation Army. This program has been administered for years in the DSS Department and there is not enough funding received to cover the cost of administering this program each quarter. **MOTION** made by Commissioner Frank Emory seconded by Commissioner Mike Haddock and unanimously carried **THAT** the process begins to move Commodities to the Salvation Army be **APPROVED** as presented.

COUNTY MANAGER'S REPORT

No Report


COMMISSIONER'S REPORTS

Commissioner Sondra Ipock-Riggs, see attached Letter to Editor marked as **EXHIBIT F**.

PUBLIC COMMENT

Mr. Wayne Hurley commented on how he feels the USDA Commodities program is a great program for the County.

MOTION made by Commissioner Joe Wiggins, seconded by Commissioner Frank Emory, and unanimously carried **THAT** the meeting be **ADJOURN** at 9:30 a.m.


Zack Koonce
Chairman

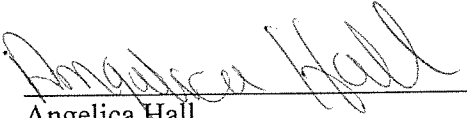

Angelica Hall
Clerk to the Board

EXHIBIT A



Jones County Health Department
418 Hwy 58 N, P. O. Box 216
Trenton, NC 28585

Phone: (252) 448-9111

Wesley P. Smith
Health Director

Fax: (252) 448-1443

Jones County Health Department
Additions/Revisions to Clinic Services Fee Schedule (Child Health)

Service	CPT Code	Current Fee	Proposed Fee
Preventative/New:			
Less than 1 year old	99381	103.50	140.00
Ages 1-4	99382	103.50	156.00
Ages 5-11	99383	103.50	156.00
Ages 12-17	99384	194.35	196.00
Ages 18-39	99385	192.05	206.00
Preventative/Established:			
Less than 1 year old	99391	103.50	131.00
Ages 1-4	99392	103.50	140.00
Ages 5-11	99393	103.50	148.00
Ages 12-17	99394	190.17	192.00
Ages 18-39	99395	190.75	190.00
Dental Procedures:			
Oral Evaluation/Instructions	D0145	42.64	65.00
Dental Varnishing Application	D1206	36.26	60.00
Vision Screening:	99173	3.86	10.00
Nutrition Screenings:			
Medical Nutrition Counseling - Individual	97802	18.17	45.00
Medical Nutrition Reassessment	97803	18.17	33.00
Medical Nutrition Counseling - Group	97804	New Fee	11.00
Developmental Screenings:			
Ages Stages Questionnaire (ASQ)	96110	11.75	18.00
CRAFTT - 15 mins.	99408	New Fee	35.00
CRAFTT - 30 mins.	99409	New Fee	65.00
Health Risk Assessment(s)	99420	9.36	22.00
Laboratory Services:			
Removal of Foreign Body	10120	New Fee	119.00
Venipuncture	36415	10.12	13.00
Capillary Blood Collection	36416	New Fee	13.00
Urinary Catheter Insertion	51701	New Fee	70.00
Ear Irrigation - Cerumen Removal	69210	75.75	75.00
Respiratory:			
Albuterol Solution	J7613	New Fee	32.00
Peak Flow	94010	New Fee	27.00
Nebulizer Treatment	94640	New Fee	23.00
Evaluate Patient Use - Nebulizer	94664	12.87	26.00

Service	CPT Code	Current Fee	Proposed Fee
Pulse Oximetry	94760	2.06	4.00
Supplies & Materials	99070	11.29	11.00
Hearing Screenings:			
Audiometry	92551	16.56	18.00
Tympanometry	92567	21.03	27.00
Tobacco Counseling:			
Tobacco Cessation Counseling 3-10 mins.	99406	New Fee	12.00
Tobacco Cessation Counseling > 10 mins.	99407	New Fee	24.00
Supplies/Miscellaneous:			
Simple Incision & Drainage	10060	96.68	118.00
Removal of Skin Tags	11200	72.95	66.00
Destruction of Lesions Initial	17000	New Fee	60.00
Destruction of Lesions 2-14	17003	New Fee	8.00
Destruction of Lesions – Warts up to 14	17110	161.45	141.00
HCG Quantitative	84702	13.50	13.00
EKG Tracing and Report	93000	31.89	28.00
Newborn Assessment – Home Visit	99502	199.64	341.00
Immunizations:			
Hepatitis A Vaccine	90633	New Fee	23.00
Hepatitis A & B Vaccine (Twin Rix)	90636	New Fee	108.00
Hib – HBOC – Hib Titer	90645	32.03	32.00
Hib – Ped Vaccine	90647	32.03	26.00
Gardasil	90649	146.43	149.00
Gardasil 9 Valent	90651	New Fee	178.00
Influenza – 6 to 35 mos.	90657	17.75	17.75
Influenza – 3 years and above	90658	17.75	17.75
Prevnar 13	90670	New Fee	115.00
Influenza – Intranasal Use	90672	New Fee	17.75
Rabies – IM (Pre & Post Exposure)	90675	148.35	285.00
Rabies – ID (Pre & Post Exposure)	90676	182.77	123.00
Rotavirus	90680	New Fee	76.00
Rotarix	90681	New Fee	110.00
Kinrix	90696	New Fee	48.00
Dtap – hib – ip (Pentacil)	90698	New Fee	87.00
DtaP – Less than 7 years	90700	18.88	19.00
Diphtheria Tetanus (dT) – Less than 7 yrs.	90702	17.14	17.00
Tetanus	90703	15.00	21.00
Measles Mumps Rubella (MMR)	90707	56.26	60.00
IPV	90713	20.18	23.00
Tetanus Diphtheria (Td)	90714	15.00	24.00
tDap	90715	35.03	38.00
Varicella	90716	96.24	90.00
Pediarix	90723	New Fee	73.00
Pneumovax 23	90732	27.02	62.00
Meningococcal SC	90733	New Fee	91.00
Menactra	90734	119.57	129.00

Service	CPT Code	Current Fee	Proposed Fee
Zoster Vaccine	90736	New Fee	175.00
Hep B	90744	25.05	40.00
Hep B - Adult	90746	72.92	56.00

The above services were revised and/or added to the Jones County Health Department Clinic Services Fee Schedule, effective March 1, 2016. These changes to the Fee Schedule were approved by both the Jones County Board of Health and Jones County Board of Commissioners on the dates indicated below.

Robert S. Jolly
Chair, Jones County Board of Health

1-28-2016
Date

Frank A. Koonce
Chair, Jones County Board of Commissioners

3-7-2016
Date

EXHIBIT B

NORTH CAROLINA

AGREEMENT

JONES COUNTY

THIS AGREEMENT (the "Agreement") is made and entered into effective as of the 14th day of March, 2016, by and between, **JONES COUNTY**, a body politic and corporate of the State of North Carolina (the "County"), and **TRENTON VOLUNTEER FIRE DEPARTMENT**, a non-profit corporation organized and existing by virtue of the laws of the State of North Carolina (the "TVFD").

RECITALS

A. TVFD has requested County to enter into a loan agreement with Jones-Onslow EMC ("JOEMC") in the amount of \$290,000.00 (with documents related thereto, collectively the "Loan Agreement"), the proceeds of which will allow County to purchase a new 2016 Pierce Saber Top Mount Fire Engine ("Vehicle"), to be leased to the TVFD.

B. JOEMC has offered to borrow the sum of \$290,000.00 from the USDA REDLG program, and in return loan this amount to the County for said purchase.

C. JOEMC may only lend this money directly to the County, and not to TVFD, and therefore the County must be the borrower of the funds for the purchase and ownership of the new Vehicle for so long as the Vehicle loan remains unsatisfied.

D. TVFD agrees to reimburse the County for all loan payments required to be paid to JOEMC, as well as to reimburse the County for all costs associated with the loan and Vehicle purchase as described herein.

E. During the pendency of the loan term, County will lease the Vehicle to TVFD, in the form attached hereto as Exhibit "A".

F. In order to set forth their agreements concerning the Lease of the Vehicle, County and TVFD are entering into this Agreement.

ARTICLE 1
Obligations of County

County shall:

1.1 Execute the Loan Agreement with JOEMC, and shall timely and satisfactorily comply with all requirements and obligations thereunder.

1.2 Execute the Lease agreement with TVFD, a copy of which is attached hereto as Exhibit "A". County shall timely and satisfactorily comply with all of its requirements and obligations thereunder.

ARTICLE 2
Obligations of TVFD

TVFD shall:

2.1 Reimburse county for any and all costs associated with the Loan Agreement and purchase of the Vehicle, including but not limited to loan and closing costs, taxes, tags, licenses, and attorney's fees within 30 days of closing. Further, TVFD will timely reimburse County for any fees, costs and expenses association with the Loan Agreement that are incurred during the term of the loan, including but not limited to any loan servicing charges.

2.2 In the event the Lease is terminated due to cause by TVFD, authorize County to withhold any funding obligations to TVFD, including but not limited to general funding and contractual funding obligations for service obligations, in an amount up to the outstanding balance of the Vehicle loan at the time of Lease termination.

2.3 Execute the Lease Agreement with County, a copy of which is attached hereto as Exhibit "A". TVFD shall timely and satisfactorily comply with all of its requirements and obligations thereunder.

2.4 Not place, suffer or permit the creation or continuation of liens or encumbrances of any kind upon the Vehicle, other than may exist in relation to the Loan Agreement.

2.5 Assure itself of the suitability of the Vehicle for its intended use under the Lease prior to execution of the Lease; and further acknowledges that the County makes no representation as to the Vehicle or its intended use

ARTICLE 3
Miscellaneous

3.1 **Entire Agreement; Modification.** This Agreement supersedes all prior agreements and constitutes the entire agreement between the parties hereto with regard to the subject matter hereof. It may not be amended or modified except by an instrument executed by all parties.

3.2 **Severability.** If any of the provisions of this Agreement shall be held by a court of competent jurisdiction to be unconstitutional or unenforceable, the decision of such court shall not affect or impair any of the remaining provisions of this Agreement, and the parties shall, to the extent they deem to be appropriate, take such actions as are necessary to correct any such unconstitutional or unenforceable provision. It is hereby declared to be the intent of the parties to this Agreement that this Agreement would have been approved and executed had such an unconstitutional or unenforceable provision been excluded therefrom.

3.3 **Binding Effect.** This Agreement shall be binding upon and inure to the benefit of the parties hereto and their respective legal representatives, successors, and assigns.

3.4 **Assignment.** Except as may otherwise be expressly provided herein, no party may assign any right, obligation, or liability arising hereunder without the other party's prior written consent. Any such assignment or attempted assignment shall be null and void.

3.5 **Covenant of Further Assurances.** The parties agree that from and after the date of execution of this Agreement, each upon the request of the other take such actions as may be reasonably required to carry out the purpose and intent of this Agreement.

3.6 **Notices.** Any notice required to be given hereunder by this Agreement shall be deemed to have been sufficiently given if mailed by certified mail, return receipt requested, postage prepaid, and addressed as follows:

Jones County

Attention: County Manager
Franky Howard
480 Hwy 58 N Unit A
Trenton NC 28585

Trenton Volunteer Fire Department

Attention: Charles Jones
President
PO Box 309
Trenton NC 28585

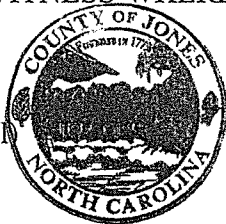
3.7 **Term.** The term of this Agreement shall coincide with the loan terms between County and JOEMC, and any final reimbursement obligations of TVFD related thereto.

3.8 **Multiple Originals.** This Agreement may be executed in duplicate multiple originals, each of which shall be deemed an original but all of which together shall constitute one and the same instrument.


3.9 **Governing Law; Exclusive Venue.** This Agreement shall be construed in accordance with and governed by the laws of the State of North Carolina. Exclusive venue for any action, whether at law or in equity, shall be in Jones County, North Carolina.

IN WITNESS WHEREOF, the parties have duly entered into this Lease, the date above written.

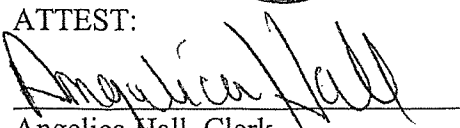
(County Seal)



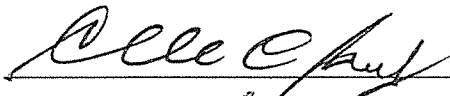
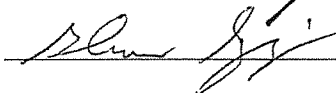
JONES COUNTY


Zack Koonce, Chair

ATTEST:


Angelica Hall, Clerk

TRENTON VOLUNTEER FIRE
DEPARTMENT

By: 
Its: 

9\\SERVER04\\lssdocs\\00000024\\00058982.000.DOCX

NORTH CAROLINA

FIRE ENGINE LEASE AGREEMENT

JONES COUNTY

THIS FIRE ENGINE LEASE AGREEMENT (the "Lease") is entered into effective as of the 14th day of March, 2016, by and between JONES COUNTY, a body politic and corporate of the State of North Carolina (the "County"), and TRENTON VOLUNTEER FIRE DEPARTMENT, a not-for-profit corporation of the State of North Carolina (the "TVFD").

WITNESSETH:

WHEREAS, TVFD provides fire protection services to the citizens of Jones County within its service area; and,

WHEREAS, TVFD has requested the County to purchase a new fire engine, subject to a loan and security agreement from Jones-Onslow EMC ("JOEMC"), and thereafter lease the same to TVFD for its use in fire protection services; and,

WHEREAS, TVFD agrees to reimburse the County for all loan payments associated with the purchase of the new fire engine; and,

WHEREAS, TVFD desires to lease the same from County.

NOW THEREFORE BE IT RESOLVED by the parties as follows:

1. *Subject and term of lease.* The County leases to TVFD, and TVFD hereby leases from the County, that certain fire engine more particularly described in Exhibit "A" attached hereto and incorporated herein by reference (the "Vehicle"), for a term beginning on March 14, 2016, and terminating on April 1, 2026. Provided however, that in the event that TVFD pays the entire lease payments under Paragraph 2 below in full prior to April 1, 2026, then the term of this Lease shall terminate on the date of final payment in full.

2. *Lease Payment.* For the use of the Vehicle, TVFD shall pay the County the sum of TWO HUNDRED FIFTY THOUSAND AND NO/100 DOLLARS (\$250,000.00), payable in annual installments of TWENTY-FIVE THOUSAND AND NO/100 DOLLARS (\$25,000.00), for ten (10) years due April 1 of each year, beginning April 1, 2016.

3. *Termination; Return of Vehicle.* Upon termination of this Lease, TVFD shall either: (i) return the Vehicle to the County in an "as-is" condition; or (ii) have the right to

purchase the Vehicle from the County in an "as-is" condition upon payment of the sum of TEN AND NO/100 DOLLARS (\$10.00).

Provided, however, that should TVFD be in breach of any condition contained within this Lease, and such breach remain uncured after ten (10) days written notice, County shall have the right to terminate this Lease and take possession of the Vehicle. Further, any remaining lease payments shall be accelerated and immediately become due.

4. *Repairs and maintenance.* TVFD shall, at its own expense, be responsible for all repairs and maintenance to the Vehicle during the term of this Lease necessary to keep and maintain the Vehicle in good mechanical condition and repair, including all repairs occasioned by accident.

5. *Insurance.* TVFD, at its own expense, shall keep in effect, during the entire term of the Lease, insurance policies insuring the Vehicle against fire, theft, collision, and injury, under such terms and conditions it otherwise insures other similar vehicles owned and operated by it.

6. *License plates and title.* Title to the Vehicle and all required licenses shall be maintained in the name of the County, at TVFD's sole cost and expense.

7. *Lease subject to certain rights of others.* All security interests, if any, in the Vehicle granted by County before or after the execution of this Lease shall be superior to this Lease; however, TVFD may remain in possession of the Vehicle until the end of the Lease term so long as TVFD is not otherwise in default hereunder.

8. *Assignment.* This Lease may not be assigned by either party without the express written consent of the other.

9. *Entire agreement.* This Lease supersedes all agreements previously made between parties relating to its subject matter. There are no other understandings or agreements between them, except for the Service Agreement, which is expressly incorporated herein by reference.

10. *Non-waiver.* No delay or failure by either party to exercise any right under this Lease, and no partial single exercise of that right, shall constitute a waiver of that or any other right, unless otherwise expressly provided herein.

11. *Headings.* Headings in this Lease are for convenience only and shall not be used to interpret or construe its provisions.

12. *Governing law; exclusive venue.* This Lease shall be construed in accordance with and governed by the laws of the State of North Carolina. Exclusive venue for any action, whether at law or in equity, shall be Jones County, North Carolina.

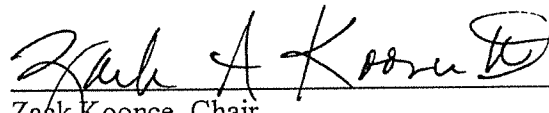
13. *Counterparts.* This Lease may be executed in two or more counterparts, each of which shall be deemed an original but all of which together shall constitute one and the same instrument.

14. *Binding effect.* The provisions of this Lease shall be binding upon and inure to the benefit of both parties, and their respective successors and assigns.

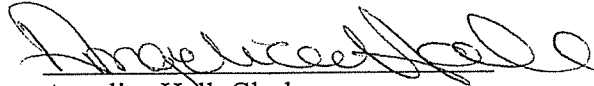
IN WITNESS WHEREOF, the parties have duly entered into this Lease, the date above written.



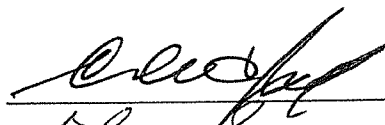
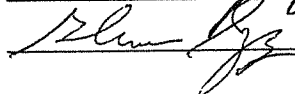
JONES COUNTY


Zack Koonce, Chair

ATTEST:


Angelica Hall, Clerk

TRENTON VOLUNTEER FIRE
DEPARTMENT

By: 
Its: 

This Instrument has been preaudited in the manner required by the Local
Government Budget and Fiscal Control Act. DATE 3/14/16
FINANCE OFFICER Brenda Clerici

EXHIBIT "A"

DESCRIPTION OF LEASED FIRE ENGINE

<u>YEAR</u>	<u>MODEL</u>	<u>VIN</u>
2016	Pierce Saber Top Mount Fire Engine	4P1BAAFF2GA016350

EXHIBIT C


North Carolina Cooperative Extension Service

NC STATE UNIVERSITY

Jones County Center
367A NC Highway 58 S
Trenton, NC 28585
Phone 252.448.9621
Fax 252.448.1243

DATE: February 23, 2016

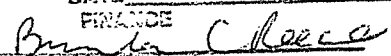
TO: Brenda Reece, Jones County Finance
Franky Howard, Jones County Manager

FROM: Ivy Reid, Director 
Jones County Cooperative Extension

RE: Purchase Laminator from SHIIP Funds

In the 2015-2016 SHIIP Budget there are funds to promote the SHIIP program, conduct SHIIP Counseling events, recognize SHIIP Volunteers and focus on assisting disabled and LIS clients. One of the ways that we accomplish this is through table top displays and creating marketing materials such as flyers, bookmarks and posters, etc. A laminator would allow these materials to be preserved and used multiple times. It would also allow the materials on the display board to be updated on a regular basis and the lamination would help them hold up to being folded up in the display board for transporting and storing.

Therefore I would like to order a laminator and laminator film from SHIIP funds in the amount of \$1200.00. This will require no funds from the county to be expended.

VENDOR NO. _____ INV. NO. _____
ACCT _____ AMOUNT _____
This instrument has been procured in the manner
required by the Local Government Budget and Fiscal
Control Act. DATE _____
OFFICER  FINANCE

Laminator.com

Your Low Price Laminating and Binding Specialists



**LOWEST PRICE
GUARANTEED**

Login

Track Orders

0 items : \$0.00

Follow Us:



Sales: 1.800.713.8879
Customer Service: 1.800.323.4307

Enter search keyword

Search



Schedule
Contract GS-25F-0013S

\$4.99

Shipping with
\$49.99 Order!

SIMPLY THE LOWEST PRICES

GUARANTEED

Laminator.com has a New Look!
See What our Clients are Saying!


[Show All Products](#)

Laminators Roll Laminators **Signature 27 Plus - 27" Roll Laminator**

Signature 27 Plus - 27" Roll Laminator

Like It? Share It!!

Like: 0

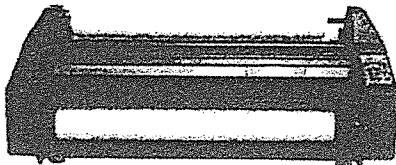
G+1 2

Tweet:

Share: 0

Price : ~~1,500.00~~
You Save: \$500.01 (33.33%)
Product ID: SIGNATURE 27 PLUS

\$999.99



Have Questions
1.800.713.8879
About buying this product?

1

Add to Cart

Exclusive to Laminator.com our Signature Line of Quality Roll Laminators are Made in the USA. The Signature Laminator line has been designed and manufactured to meet the demands of our laminating clients. The Signature 27 Plus - 27" Roll Laminator is the the perfect choice for schools, churches and offices where a quality roll laminator is needed at an economical price. This American Manufactured machine features easy-to-use controls, an auto shutoff for energy savings, variable temperature control, an advanced safety shield, a rear trimmer and more!!

Warranty: 1 Year Mfr Warranty

[Refer to Friend](#)

Other Views

Signature 27 Plus - 27" Roll Laminator



[Description](#) [Features/Specs](#) [Packages](#) [Product Review](#) [Videos](#)

The Signature 27 Plus - 27" Roll Laminator is a true technological advancement in the roll laminating machine industry. Designed with superior american engineering, the Signature 27 Plus is a 27 inch heated roller roll laminator with all the features of the Signature 27 including an auto shutoff for increased energy savings, a variable temperature control to provide superior lamination at a lower temperature settings, and easy-to-use controls PLUS an safety shield switch for increased safety and a rear splitter making trimming documents easy and efficient

This roll laminator is the perfect roll laminator solution for schools and offices due to its ease of use. The Signature 27 Plus is designed to laminate with either 1.5mil or 3mil gauge film. It is the ideal solution for laminating posters and other larger documents.

The Signature 27 Plus - 27" Roll Laminator width capacity allows you to laminate those items that can't be accommodated in a conventional 25" machine.

With our Low Price Guaranty nobody saves you more money on quality laminating and binding products than Laminator.com.

Shop Online or Call Today!

Quality Assurance Guaranty!

Recommended Supplies

Trade-In Program
Trade In your
Old Roll Laminator
Call **1.800.713.8879**
for Details

FREE Shipping
on select Laminators



Have Questions
1.800.713.8879
About buying products?



Certificate

EV SSL



Click to Chat

SCHOOLS
GOVERNMENT
PURCHASE
ORDERS ACCEPTED
[MORE DETAILS](#)

Laminator.com

Your Low Price Laminating and Binding Specialists

Sales: 1.800.713.8879
Customer Service: 1.800.323.4307

Login

Track Orders

5 items in cart

Follow Us:



Enter search keyword

Search



Schedule
Contract GS-25F-0013S

\$4.99

Shipping with
\$49.99 Order!

SIMPLY THE LOWEST PRICES
GUARANTEED

Laminator.com has a New Look!
See What our Customers are Saying!

Show All Products

Product ID	Product Name	Product Image	Unit Price	Discount Price	Qty	Subtotal	Remove
RL-25-03-250-1-G	3 mil - 25" x 250' Clear School Roll Laminating Film Core Size 1"		\$24.79	\$24.79	4	\$99.16	
SIGNATURE 27 PLUS	Signature 27 Plus - 27" Roll Laminator		\$999.99	-NA-	1	\$999.99	

Based on your selection, you may be interested in the following items:



Signature Onsite Service Plan - 1 Year

\$400.00



Signature Onsite Service Plan - 3 Years

\$927.00



Signature Onsite Service Plan - 2 Years

\$738.00

You Will Earn: 1110 Gold Points
Subtotal \$1,099.15
Grand Total \$1,099.15

We Accept

Spend your points

You need to [log-in](#) to use your points.

Discount Codes

Enter your coupon code if you have one.

APPLY COUPON



Estimate Shipping

Enter your destination to get a shipping estimate.

Country *

United States

State/Province *

Please select region, state or province

Zip/Postal Code *

OR-

If you are a Paypal checkout user

Check out with

Customer Service Center

Assistance

Help
FAQ
Email Us
Location
Sitemap

About Laminator

History
News
Privacy Policy
Social Media
About Us

More info

Shipping
Returns
Price Matching
Terms of use

Contact Us

Laminator.com Inc is located in the Chicago area. To contact a sales representative please call 1-800-713-8879. For customer service please call 1-800-323-4307. Our Fax Number is 1-847-996-0610.

Our office hours are Mon-Fri from 8:00am to 4:30pm CST. If you call after hours please leave a message and your call will be returned.
13777 Laurel Drive, Lake Forest, Illinois 60045
email at info@Laminator.com

Budget Amendment

EXHIBIT D

Date: 3/7/2016

Fund: General

Fiscal Year: 2015-2016

Amendment #2

Increase Revenue

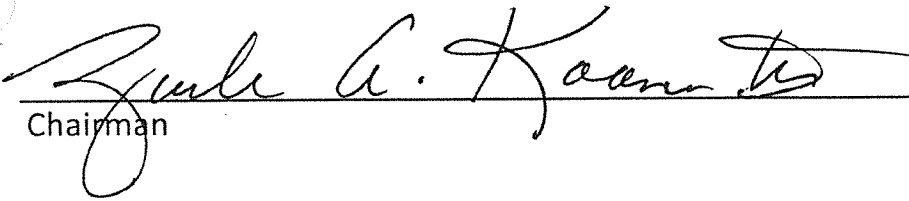
NCDPS - EM Homeland Security	Homeland Security Grant	11-0211-4523-20	13,750.00
------------------------------	-------------------------	-----------------	-----------

Total Increase in Revenue	13,750.00
---------------------------	-----------

Increase Expenditures


Bioterrorism/PHP&R	Capital Items over \$5000	11-5189-5500-05	13,750.00
--------------------	---------------------------	-----------------	-----------

Total Increase in Expenditures	13,750.00
--------------------------------	-----------


Chairman


County Manager


Clerk to the Board


Finance Officer

✓

Budget Amendment

Date: 3/7/2016

Fund: General

Fiscal Year: 2015-2016

Amendment #3

Decrease Expenditures

Food & Lodging	Contract Services	11-5181-5440-13	539.99
----------------	-------------------	-----------------	--------

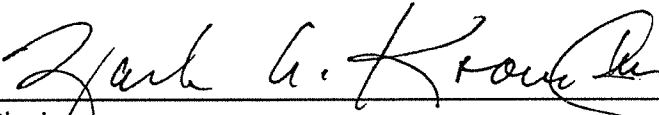
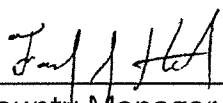
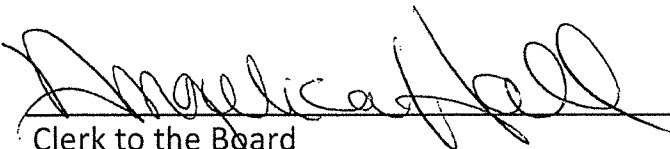
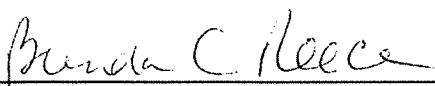
Total Decrease in Expenditures			539.99
--------------------------------	--	--	--------

Increase Expenditures

Food & Lodging	Office Supplies	11-5181-5260-00	40.00
----------------	-----------------	-----------------	-------

Food & Lodging	Capital Items Under \$5000	11-5181-5500-00	499.99
----------------	----------------------------	-----------------	--------

Total Increase in Expenditures			539.99
--------------------------------	--	--	--------


Chairman
County Manager
Clerk to the Board
Finance Officer



Budget Amendment

Date: 3/7/2016

Fund: 28 - CDBG 14/DOT

Fiscal Year: 2015-2016

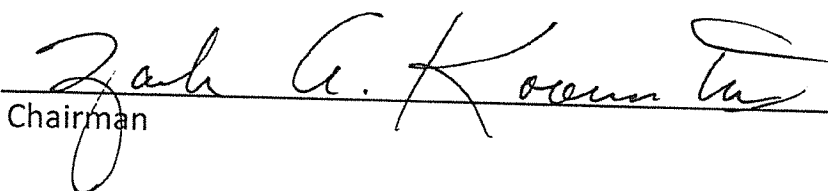
Amendment #4

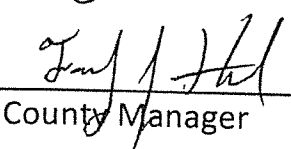
Reduce Revenues

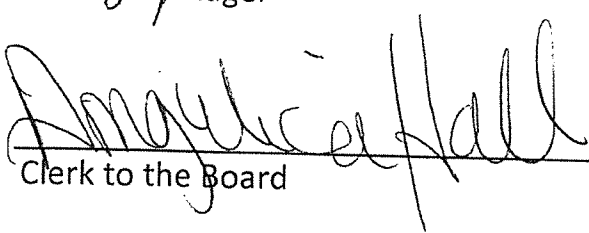
Restricted Other	CDBG 14/DOT	28-0214-4904-04	362,823.00
Total Decrease in ^{Revenues} Expenditures			362,823.00

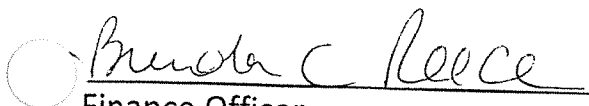
Reduce Expenditures

CDBG 14/DOT	Administration	288164 591216	14,675.00
CDBG 14/DOT	Observation	288164 591217	34,573.00
CDBG 14/DOT	Construction	288164 591218	281,285.00
CDBG 14/DOT	Contingency	288164 591219	28,180.00
CDBG 14/DOT	Additional Services	288164 591227	4,110.00
Total ^{Decrease} Increase in Expenditures			362,823.00


Chairman


County Manager


Clerk to the Board


Finance Officer

Moving from Fund 28 to Fund 66 - not CDBG



Budget Amendment

Date: 3/7/2016

Fund: 66 - Water Const - 14/DOT Water Line Project

Fiscal Year: 2015-2016 Amendment #5

Increase Revenues

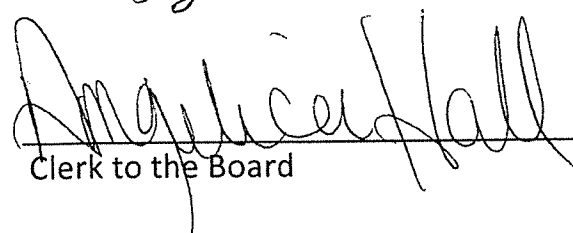
Restricted Other	14/DOT Water Line	66-0213-4904-04	362,823.00
Total ^{Increase in Revenues} Decrease in Expenditures			362,823.00

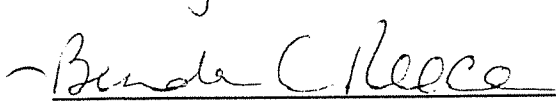
Increase Expenditures

WTR Const-14/DOT	Administration	66-8164-5912-16	14,675.00
WTR Const-14/DOT	Observation	66-8164-5912-17	34,573.00
WTR Const-14/DOT	Construction	66-8164-5912-18	281,285.00
WTR Const-14/DOT	Contingency	66-8164-5912-19	28,180.00
WTR Const-14/DOT	Additional Services	66-8164-5912-27	4,110.00
Total Increase in Expenditures			362,823.00


Chairman


County Manager


Clerk to the Board


Finance Officer

Moving from Fund 28 to Fund 66 - Not COBG - See Amendment #4 ✓

(Rev. 10-08)

APPLICATION

EXHIBIT E

for
AGRICULTURE, HORTICULTURE, AND FORESTRY PRESENT-USE VALUE ASSESSMENTCOUNTY: JonesTAX YEAR 2016
2015

The Agriculture, Horticulture, and Forestry Present-Use Value program is governed by the North Carolina General Statutes. Before applying, please read the current version of Form AV-4 which is a compilation of the applicable Present-Use Value statutes (available on the web at <http://www.dor.state.nc.us/downloads/property.html> or at the Tax Assessor's office).

Full Name of Owner(s): FRANKIE K. JOHNSON & H. GRAHAM KNOTT JR.Mailing Address of Owner: P.O. Box 506 Kinston, N.C. 28502Phone Numbers: Home: (252) 522-1590 Work: (252) 523-3996 Cell: (252) 559-5998
252-523- (252) 521-1113

This application is for: (check all that apply)

☒ AGRICULTURE (includes Aquaculture)☐ HORTICULTURE☒ FORESTRY

Enter the Parcel Identification Number, acreage breakdown, and acreage total for each tax parcel included in this application:

PARCEL ID	OPEN LAND in PRODUCTION	OPEN LAND not in PRODUCTION	WOOD LAND	WASTE LAND	CRP LAND	HOME SITE	OTHER (Describe in Comments)	TOTAL ACRES
4544-01-8960-00	14.5	0	4.24	—	—	—	—	18.73

Comments: _____

YES NO Does the applicant own property in other counties that is also in present-use value and is within 50 miles of this property? If YES, list the county or counties and parcel identification number(s):

County: Lenoir Parcel ID: 22504, 22505**IMPORTANT!**

AGRICULTURE and HORTICULTURE applications with LESS than 20 acres of woodland generally need to complete PART 1, 2, and 4.

AGRICULTURE and HORTICULTURE applications with MORE than 20 acres of woodland generally need to complete PART 1, 2, 3, and 4.

FORESTRY applications need to complete PARTS 1, 3, and 4.

ADDITIONALLY, applications for CONTINUED USE of existing present-use value classification need to complete PART 5.

Please contact the Tax Assessor's office if you have questions about which parts should be completed.

Jack A. Moore
2016

FD-203
(Rev. 10-08)

PART I OWNERSHIP

On what date did the applicant become the owner of the property? DATE: 1-26-15

If owned less than four full years on January 1, provide: Name of Previous Owner: A F Waller, Ruth Waller
How the Applicant is Related to the Previous Owner: N/A

YES ☒ NO ☐ Did one of the applicants reside on the property on January 1 of the year for which this application is made?
If YES, provide name of resident: _____

YES ☒ NO ☐ Are any of the acres leased out to a farmer? If YES, indicate: Number of acres leased out: 14.5
Name of farmer leasing the land: KN FARMING LLC Phone: 252-523-3996

Check the legal form of ownership and answer the questions (if any) for that ownership:

☐ One individual. ☐ Husband and Wife. (as tenants by the entirety)

☐ Business Entity. (Circle one: Corporation, Limited Liability Company, Partnership) List all the direct shareholders, members, or partners of the business entity and their farming activities:

Member: _____	Farming Activities: _____
Member: _____	Farming Activities: _____
Member: _____	Farming Activities: _____
Member: _____	Farming Activities: _____

YES NO Are any of the direct shareholders, members, or partners either a business entity or trust (i.e. not an individual)? If YES, you must attach a breakdown of those business entities or trusts until you reach the individual level of ownership interest and you must describe those individual's farming activities.

YES NO Once you have reached the individual level of ownership interest, are all of the individuals relatives of each other? (See G.S. 105-277.2(5a) for the definition of relative.)

State the principal business of the business entity: _____

☐ Trust. List the trustee(s), name of the trust, and all of the beneficiaries:

Trustee(s): _____	Name of the trust: _____
Beneficiary: _____	Farming Activities: _____
Beneficiary: _____	Farming Activities: _____
Beneficiary: _____	Farming Activities: _____
Beneficiary: _____	Farming Activities: _____

YES NO Are any of the beneficiaries either a business entity or trust (i.e. not an individual)? If YES, you must attach a breakdown of those business entities or trusts until you reach the individual level of ownership interest and you must describe those individual's farming activities.

YES NO Once you have reached the individual level of ownership interest, are all of the beneficiaries either the trust's creator or relatives of the creator? (See G.S. 105-277.2(5a) for the definition of relative.)

☐ Tenants in common. List all tenants and their percentage of ownership:

Owner: _____ %	Owner: _____ %
Owner: _____ %	Owner: _____ %

YES NO Are any of the tenants either a business entity or trust? If YES, you must make a copy of this page for each business entity or trust. You must complete the business entity section only or trust section only for each tenant, as appropriate, labeling each copy with the name of the business entity or trust.

The Tax Assessor may contact you for additional information after reviewing this application.

FD-100 (Rev. 10-08)

PART 2 AGRICULTURE and HORTICULTURE

For the past three years and for each tax parcel within the farm unit, enter the agricultural or horticultural products actually produced on the land and the gross income from the sale of the products, including livestock, poultry, and aquatic species. INCOME INFORMATION IS SUBJECT TO VERIFICATION.

If payments are received from any governmental soil conservation or land retirement program, indicate the acres and amount of income in the table below. Provide the name of the program in the Product column.

Do not include income received from the rental of the land. Income must be from the sale of the product.

Parcel ID	ONE YEAR AGO 20 <u>15</u>			TWO YEARS AGO 20 <u>14</u>			THREE YEARS AGO 20 <u>13</u>		
	Product	Acres	Income	Product	Acres	Income	Product	Acres	Income
4544-01- 8960-00	Soybeans	14.5	2,500 ⁰⁰	Cotton	14.5	2500 ⁰⁰	Cotton	14.5	3000 ⁰⁰
	Totals			Totals			Totals		
	Totals			Totals			Totals		
	Totals			Totals			Totals		
	Totals			Totals			Totals		
	Totals			Totals			Totals		
	Totals			Totals			Totals		

YES NO If this application covers a horticultural tract used to grow Christmas trees, has a written management plan been prepared? If YES, attach a copy. If NO, attach a full explanation of your operation that contains at least the following: year each tract was planted, gross income from each tract, site management practices, number of trees per acre, and expected date of harvesting for each tract.

If this application covers an aquatic species farming operation, enter the total pounds produced for commercial sale annually for the last three years: Year 20__ : _____ lbs, Year 20__ : _____ lbs, Year 20__ : _____ lbs

PART 3 FORESTRY

Attach a complete copy of your forest management plan. Indicate below who prepared the plan:

☐ N. C. Division of Forest Resources ☐ Consulting Forester ☐ Owner ☐ Other

Note: The property must be actively engaged in the commercial growing of trees under a sound management program as of January 1 of the year for which application is made.

(Rev. 10-08)

Key elements in a written plan for a sound forestland management program are listed below:

1. Management and Landowner Objectives Statement—Long range and short range objectives of owner(s) as appropriate.
2. Location--Include a map or aerial photograph that locates the property described and also delineates each stand referenced in the "Forest Stand(s) Description/Inventory and Stand Management Recommendations" (item 3 below).
3. Forest Stand(s) Description/Inventory and Stand Management Recommendations -- Include a detailed description of various stands within the forestry unit. Each stand description should detail the acreage, species, age, size (tree diameter, basal area, heights), condition (quality and vigor), topography, soils and site index or productivity information. Stand-specific forest management practices needed to sustain productivity, health and vigor must be included with proposed timetable for implementation.
4. Regeneration-Harvest Methods and Dates--For each stand, establish a target timetable for harvest of crop trees, specifying the type of regeneration-harvest (clear cut, seed tree, shelter wood, or selection regeneration systems as applicable).
5. Regeneration Technique--Should include a sound proposed regeneration plan for each stand when harvest of final crop trees is done. Specify intent to naturally regenerate or plant trees.

NOTE: Forest management plans can and should be updated as forest conditions significantly change (e.g. change in product class mix as the stand ages and grows, storm damage, insect or disease attack, timber harvest, thinning, wildfire). The county will audit plans periodically and, to remain eligible for use-value treatment, the plan must be implemented.

PART 4 AFFIRMATION

AFFIRMATION: I (we) the undersigned declare under penalties of law that this application and any attachments hereto have been examined by me (us) and to the best of my (our) knowledge and belief are true and correct. In addition, I (we) fully understand that an ineligible transfer of the property or failure to keep the property actively engaged in commercial production under a sound management program will result in the loss of eligibility. I (we) fully understand that loss of eligibility will result in removal from the program and the immediate billing of deferred taxes.

Signature(s) of Owner(s):	<u>Frank R. Johnson</u>	Title: <u>Owner</u>	Date: <u>2-15-16</u>
(All tenants of a tenancy	<u>Frank R. Johnson</u>	Title: <u>Owner</u>	Date: <u>2-15-16</u>
in common must sign.)		Title: _____	Date: _____

PART 5 CONTINUED USE (Complete only if the property is currently in Present-Use Value and you are applying for immediate eligibility under the Continued Use exception. See G.S. 105-277.2(b2)(1) for full details.)

- I certify:
1. The property is currently in Present-Use Value.
 2. I intend to continue the current use of the land under which it currently qualifies.
 3. I understand I will be responsible for all deferred taxes due because of any disqualification.
 4. I ACCEPT FULL LIABILITY FOR ANY EXISTING DEFERRED TAXES.

Note: If the property is currently in Present-Use Value and liability is not accepted, the full amount of the deferred taxes will typically be due in the name of the grantor immediately. Liability need not be accepted and no deferred taxes are due for qualifying transfers pursuant to G.S. 105-277.3(b) and (b1). For example, liability does not need to be accepted for qualifying transfers to relatives. However, any deferred taxes existing at the time of transfer will remain a lien on the property. Owners already receiving Present-Use Value on properties not included in this application may wish to review the alternative provisions of G.S. 105-277.3(b2)(2).

Signature(s) of Owner(s):	_____	Title: _____	Date: _____
(All tenants of a tenancy	_____	Title: _____	Date: _____
in common must sign.)	_____	Title: _____	Date: _____

THIS SPACE FOR OFFICE USE ONLY

[] APPROVED [] DENIED BY: _____ REASON FOR DENIAL: _____

AV-5
Web
3-13

Application for Agriculture, Horticulture, and Forestry Present-Use Value Assessment

(G.S. 105-277.2 through G.S. 105-277.7)

County of Jones

, NC

Tax Year 2015

Full Name of Owner(s) Donnie William Sparkey Mills			
Mailing Address of Owner 1764 Lyman Rd.			
City Chinquapin	State NC	Zip Code 28521	
Home Telephone Number	Work Telephone Number	Ext.	Cell Phone Number 910-358-6977

Instructions

Application Deadline: This application must be filed during the regular listing period, or within 30 days of a notice of a change in valuation, or within 60 days of a transfer of the land.

Where to Submit Application: Submit this application to the county tax assessor where this property is located. County tax assessor addresses and telephone numbers can be found online at: www.dornc.com/downloads/CountyList.pdf. DO NOT submit this application to the North Carolina Department of Revenue.

- Office Use Only:

This application is for: (check all that apply)

☒ **AGRICULTURE** (includes Aquaculture)

☐ **HORTICULTURE**

☐ **FORESTRY**

Enter the Parcel Identification Number, acreage breakdown, and acreage total for each tax parcel included in this application:

PARCEL ID	OPEN LAND in Production	OPEN LAND not in Production	WOOD LAND	WASTE LAND	CRP LAND	HOME SITE	OTHER (Describe in Comments)	TOTAL ACRES
4416-31-4938-00	6.94		6.76					13.70
4416-32-3063-00	3.27		4.71					7.98
4416-32-3786-00	2.65		.97					3.62
4416-51-2496-00	66.94		3.80					70.74

Comments:

☐ Yes ☐ No Does the applicant own property in other counties that is also in present-use value and is within 50 miles of this property? If YES, list the county or counties and parcel identification number(s):

County: _____

Parcel ID: _____

County: _____

Parcel ID: _____

IMPORTANT!

AGRICULTURE and HORTICULTURE applications with LESS than 20 acres of woodland generally need to complete PARTS 1, 2, and 4.

AGRICULTURE and HORTICULTURE applications with MORE than 20 acres of woodland generally need to complete PARTS 1, 2, 3, and 4.

FORESTRY applications need to complete PARTS 1, 3, and 4.

ADDITIONALLY, applications for CONTINUED USE of existing present-use value classification need to complete PART 5.

Please contact the Tax Assessor's office if you have questions about which parts should be completed.

Donnie William Sparkey Mills

Page 2, AV-5, Web, 3-13

Part 1. OwnershipOn what date did the applicant become the owner of the property? DATE: March 13, 2015If owned less than four full years on January 1, provide: Name of Previous Owner: Billy MillsHow the Applicant is Related to the Previous Owner: Son☐ Yes ☒ No ➤ Did one of the applicants reside on the property on January 1 of the year for which this application is made?

If YES, provide name of resident: _____

☐ Yes ☒ No ➤ Are any of the acres leased out to a farmer? If YES, indicate: Number of acres leased out: _____

Name of farmer leasing the land: _____ Phone: _____

Choose the legal form of ownership from "a - e" below, and answer the questions, if any, for that ownership:☒ a. One Individual ☐ b. Husband and Wife (as tenants by the entirety)☐ c. Business Entity. (Circle one: Corporation, Limited Liability Company, Partnership) List all the direct shareholders, members, or partners of the business entity and their farming activities:

Member: _____

Farming Activities: _____

Member: _____

Farming Activities: _____

Member: _____

Farming Activities: _____

Member: _____

Farming Activities: _____

☐ Yes ☐ No ➤ Are any of the direct shareholders, members, or partners either a business entity or trust (i.e. not an individual)? If YES, you must attach a breakdown of those business entities or trusts until you reach the individual level of ownership interest and you must describe those individuals' farming activities.☐ Yes ☐ No ➤ Once you have reached the individual level of ownership interest, are all of the individuals relatives of each other? (See G.S. 105-277.2(5a) for the definition of relative.)

State the principal business of the business entity: _____

☐ d. Trust. List the trustee(s), name of the trust, and all of the beneficiaries:

Trustee(s): _____

Name of trust: _____

Beneficiary: _____

Farming Activities: _____

Beneficiary: _____

Farming Activities: _____

Beneficiary: _____

Farming Activities: _____

Beneficiary: _____

Farming Activities: _____

☐ Yes ☐ No ➤ Are any of the beneficiaries either a business entity or trust (i.e. not an individual)? If YES, you must attach a breakdown of those business entities or trusts until you reach the individual level of ownership interest and you must describe those individual's farming activities.☐ Yes ☐ No ➤ Once you have reached the individual level of ownership interest, are all of the beneficiaries either the trust's creator or relatives of the creator? (See G.S. 105-277.2(5a) for the definition of relative.)☐ e. Tenants in common. List the tenants and their percentage of ownership (round to the nearest 0.1%):

Owner _____ %

Owner _____ %

Owner _____ %

Owner _____ %

☐ Yes ☐ No ➤ Are any of the tenants either a business entity or trust? If YES, you must make a copy of this page for each business entity or trust. You must complete the business entity section only or trust section only for each tenant, as appropriate, labeling each copy with the name of the business entity or trust.The Tax Assessor may contact you for additional information after reviewing this application.

Page 3, AV-5, Web, 3-13

Part 2. Agriculture and Horticulture

For the past three years and for each tax parcel within the farm unit, enter the agricultural or horticultural products actually produced on the land and the gross income from the sale of the products, including livestock, poultry, and aquatic species. INCOME INFORMATION IS SUBJECT TO VERIFICATION.

If payments are received from any governmental soil conservation or land retirement program, indicate the acres and amount of income in the table below. Provide the name of the program in the Product column.

Do not include income received from the rental of the land. Income must be from the sale of the product.

Parcel ID	ONE YEAR AGO 20 <u>14</u>			TWO YEARS AGO 20 <u>13</u>			THREE YEARS AGO 20 <u>12</u>		
	Product	Acres	Income	Product	Acres	Income	Product	Acres	Income
	Cows	1.1	8835	Cows	1.1	85,643	Cows	1.1	75,965
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0

☐ Yes ☐ No ➤ If this application covers a horticultural tract used to grow Christmas trees, has a written management plan been prepared? If YES, attach a copy. If NO, attach a full explanation of your operation that contains at least the following: year each tract was planted, gross income from each tract, site management practices, number of trees per acre, and expected date of harvesting for each tract.

If this application covers an aquatic species farming operation, enter the total pounds produced for commercial sale annually for the last three years: Year 20 lbs, Year 20 lbs, Year 20 lbs

Part 3. Forestry

Attach a complete copy of your forest management plan. Indicate below who prepared the plan:

☐ N.C. Division of Forest Resources ☐ Consulting Forester ☐ Owner ☐ Other

Note: The property must be actively engaged in the commercial growing of trees under a sound management program as of January 1 of the year for which application is made.

Page 4, AV-5, Web. 3-13

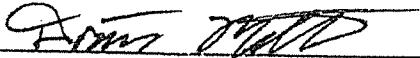

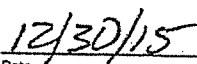
Key elements in a written plan for a sound forestland management program are listed below:

1. Management and Landowner Objectives Statement—Long range and short range objectives of owner(s) as appropriate.
2. Location—Include a map or aerial photograph that locates the property described and also delineates each stand referenced in the "Forest Stand(s) Description/Inventory and Stand Management Recommendations" (item 3 below).
3. Forest Stand(s) Description/Inventory and Stand Management Recommendations -- Include a detailed description of various stands within the forestry unit. Each stand description should detail the acreage, species, age, size (tree diameter, basal area, heights), condition (quality and vigor), topography, soils and site index or productivity information. Stand-specific forest management practices needed to sustain productivity, health and vigor must be included with proposed timetable for implementation.
4. Regeneration-Harvest Methods and Dates--For each stand, establish a target timetable for harvest of crop trees, specifying the type of regeneration-harvest (clear cut, seed tree, shelter wood, or selection regeneration systems as applicable).
5. Regeneration Technique--Should include a sound proposed regeneration plan for each stand when harvest of final crop trees is done. Specify intent to naturally regenerate or plant trees.

NOTE: Forest management plans can and should be updated as forest conditions significantly change (e.g. change in product class mix as the stand ages and grows, storm damage, insect or disease attack, timber harvest, thinning, wildfire). The county will audit plans periodically and, to remain eligible for use-value treatment, the plan must be implemented.

Part 4. Affirmation

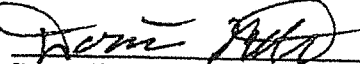

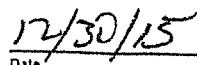
AFFIRMATION OF APPLICANT—I (we) the undersigned declare under penalties of law that this application and any attachments hereto have been examined by me (us) and to the best of my (our) knowledge and belief are true and correct. In addition, I (we) fully understand that an ineligible transfer of the property or failure to keep the property actively engaged in commercial production under a sound management program will result in the loss of eligibility. I (we) fully understand that loss of eligibility will result in removal from the program and the immediate billing of deferred taxes.

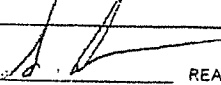
		
Signature of Owner (All tenants of a tenancy in common must sign.)	Title	Date
_____ Signature of Owner (All tenants of a tenancy in common must sign.)	_____ Title	_____ Date
_____ Signature of Owner (All tenants of a tenancy in common must sign.)	_____ Title	_____ Date

Part 5. Continued Use *(Complete only if the property is currently in Present-Use Value and you are applying for immediate eligibility under the Continued Use exception. See G.S. 105-277.3(b2)(1) for full details.)*

- I certify:
1. The property is currently in Present-Use Value.
 2. I intend to continue the current use of the land under which it currently qualifies.
 3. I understand I will be responsible for all deferred taxes due because of any disqualification.
 4. I ACCEPT FULL LIABILITY FOR ANY EXISTING DEFERRED TAXES.

Note: If the property is currently in Present-Use Value and liability is not accepted, the full amount of the deferred taxes will typically be due in the name of the grantor immediately. Liability need not be accepted and no deferred taxes are due for qualifying transfers pursuant to G.S. 105-277.3(b) and (b1). For example, liability does not need to be accepted for qualifying transfers to relatives. However, any deferred taxes existing at the time of transfer will remain a lien on the property. Owners already receiving Present-Use Value on properties not included in this application may wish to review the alternative provisions of G.S. 105-277.3(b2)(2).

		
Signature of Owner (All tenants of a tenancy in common must sign.)	Title	Date
_____ Signature of Owner (All tenants of a tenancy in common must sign.)	_____ Title	_____ Date
_____ Signature of Owner (All tenants of a tenancy in common must sign.)	_____ Title	_____ Date

FOR OFFICE USE ONLY: ☐ APPROVED ☒ DENIED BY:  REASON FOR DENIAL: 105-277.3(4)(1)
105-277.3(4)(3)

910-358-6977

AV-5

Web
3-13

Application for Agriculture, Horticulture, and Forestry Present-Use Value Assessment

(G.S. 105-277.2 through G.S. 105-277.7)

County of Jones

NC

Tax Year 2015

Full Name of Owner(s) DC Mills Farms, Inc.		State NC		Zip Code 28521	
Mailing Address of Owner 1764 Lyman Rd.		Work Telephone Number		Ext.	
City Chinquapin		Cell Phone Number 910-358-6977			
Home Telephone Number					

Instructions

Application Deadline: This application must be filed during the regular listing period, or within 30 days of a notice of a change in valuation, or within 60 days of a transfer of the land.

Where to Submit Application: Submit this application to the county tax assessor where this property is located. County tax assessor addresses and telephone numbers can be found online at: www.dornc.com/downloads/CountyList.pdf. DO NOT submit this application to the North Carolina Department of Revenue.

- Office Use Only:

This application is for: (check all that apply)

☒ **AGRICULTURE** (includes Aquaculture)☐ **HORTICULTURE**☐ **FORESTRY**

Enter the Parcel Identification Number, acreage breakdown, and acreage total for each tax parcel included in this application:

PARCEL ID	OPEN LAND in Production	OPEN LAND not in Production	WOOD LAND	WASTE LAND	CRP LAND	HOME SITE	OTHER (Describe in Comments)	TOTAL ACRES
4416-42-0476-00	13.83		9.50					
4416-42-7543-00							9.50	9.50

Comments: hog farm

☐ Yes ☐ No Does the applicant own property in other counties that is also in present-use value and is within 50 miles of this property? If YES, list the county or counties and parcel identification number(s):

County:

Parcel ID:

County:

Parcel ID:

IMPORTANT!

AGRICULTURE and HORTICULTURE applications with LESS than 20 acres of woodland generally need to complete PARTS 1, 2, and 4.

AGRICULTURE and HORTICULTURE applications with MORE than 20 acres of woodland generally need to complete PARTS 1, 2, 3, and 4.

FORESTRY applications need to complete PARTS 1, 3, and 4.

ADDITIONALLY, applications for CONTINUED USE of existing present-use value classification need to complete PART 5.

Please contact the Tax Assessor's office if you have questions about which parts should be completed.

David B. Rasmussen, Jr.

Page 2, AV-5, Web, 3-13

Part 1. OwnershipOn what date did the applicant become the owner of the property? DATE: March 13, 2015If owned less than four full years on January 1, provide: Name of Previous Owner: Mills Farms, Inc / Billy MillsHow the Applicant is Related to the Previous Owner: Son & Daughter-in-law☐ Yes ☒ No ➤ Did one of the applicants reside on the property on January 1 of the year for which this application is made?

If YES, provide name of resident: _____

☐ Yes ☒ No ➤ Are any of the acres leased out to a farmer? If YES, indicate: Number of acres leased out: _____

Name of farmer leasing the land: _____

Phone: _____

Choose the legal form of ownership from "a - e" below, and answer the questions, if any, for that ownership:☐ a. One Individual☐ b. Husband and Wife (as tenants by the entirety)☒ c. Business Entity. (Circle one: Corporation, Limited Liability Company, Partnership) List all the direct shareholders, members, or partners of the business entity and their farming activities:Member: Christian MillsFarming Activities: Hogs, Cows, Row Crop

Member: _____

Farming Activities: _____

Member: _____

Farming Activities: _____

Member: _____

Farming Activities: _____

☐ Yes ☒ No ➤ Are any of the direct shareholders, members, or partners either a business entity or trust (i.e. not an individual)? If YES, you must attach a breakdown of those business entities or trusts until you reach the individual level of ownership interest and you must describe those individuals' farming activities.☒ Yes ☐ No ➤ Once you have reached the individual level of ownership interest, are all of the individuals relatives of each other? (See G.S. 105-277.2(5a) for the definition of relative.)State the principal business of the business entity: Farming☐ d. Trust. List the trustee(s), name of the trust, and all of the beneficiaries:

Trustee(s): _____

Name of trust: _____

Beneficiary: _____

Farming Activities: _____

Beneficiary: _____

Farming Activities: _____

Beneficiary: _____

Farming Activities: _____

Beneficiary: _____

Farming Activities: _____

☐ Yes ☐ No ➤ Are any of the beneficiaries either a business entity or trust (i.e. not an individual)? If YES, you must attach a breakdown of those business entities or trusts until you reach the individual level of ownership interest and you must describe those individual's farming activities.☐ Yes ☐ No ➤ Once you have reached the individual level of ownership interest, are all of the beneficiaries either the trust's creator or relatives of the creator? (See G.S. 105-277.2(5a) for the definition of relative.)☐ e. Tenants in common. List the tenants and their percentage of ownership (round to the nearest 0.1%):

Owner _____ %

Owner _____ %

Owner _____ %

Owner _____ %

☐ Yes ☐ No ➤ Are any of the tenants either a business entity or trust? If YES, you must make a copy of this page for each business entity or trust. You must complete the business entity section only for each tenant, as appropriate, labeling each copy with the name of the business entity or trust.The Tax Assessor may contact you for additional information after reviewing this application.

Page 3, AV-5, Web, 3-13

Part 2. Agriculture and Horticulture

For the past three years and for each tax parcel within the farm unit, enter the agricultural or horticultural products actually produced on the land and the gross income from the sale of the products, including livestock, poultry, and aquatic species. **INCOME INFORMATION IS SUBJECT TO VERIFICATION.**

If payments are received from any governmental soil conservation or land retirement program, indicate the acres and amount of income in the table below. Provide the name of the program in the Product column.

Do not include income received from the rental of the land. Income must be from the sale of the product.

Parcel ID	ONE YEAR AGO 20 <u>14</u>			TWO YEARS AGO 20 <u>13</u>			THREE YEARS AGO 20 <u>12</u>		
	Product	Acres	Income	Product	Acres	Income	Product	Acres	Income
4416	Pork	9.50	21,250	Pork	9.50	22,500	Pork	9.50	22,500
4275									
4300									
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0
4416	Corn	13.83	88,115	Corn	13.83	88,115	Corn	13.83	88,115
4204									
7600									
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0
	Totals	0.00	0	Totals	0.00	0	Totals	0.00	0

☐ Yes ☐ No ➤ If this application covers a horticultural tract used to grow Christmas trees, has a written management plan been prepared? If YES, attach a copy. If NO, attach a full explanation of your operation that contains at least the following: year each tract was planted, gross income from each tract, site management practices, number of trees per acre, and expected date of harvesting for each tract.

If this application covers an aquatic species farming operation, enter the total pounds produced for commercial sale annually for the last three years: Year 20 lbs, Year 20 lbs, Year 20 lbs

Part 3. Forestry

Attach a complete copy of your forest management plan. Indicate below who prepared the plan:

☐ N.C. Division of Forest Resources ☐ Consulting Forester ☐ Owner ☐ Other

Note: The property must be actively engaged in the commercial growing of trees under a sound management program as of January 1 of the year for which application is made.

Page 4, AV-5, Web, 3-13

Key elements in a written plan for a sound forestland management program are listed below:

1. Management and Landowner Objectives Statement—Long range and short range objectives of owner(s) as appropriate.
2. Location--Include a map or aerial photograph that locates the property described and also delineates each stand referenced in the "Forest Stand(s) Description/Inventory and Stand Management Recommendations" (item 3 below).
3. Forest Stand(s) Description/Inventory and Stand Management Recommendations -- Include a detailed description of various stands within the forestry unit. Each stand description should detail the acreage, species, age, size (tree diameter, basal area, heights), condition (quality and vigor), topography, soils and site index or productivity information. Stand-specific forest management practices needed to sustain productivity, health and vigor must be included with proposed timetable for implementation.
4. Regeneration-Harvest Methods and Dates--For each stand, establish a target timetable for harvest of crop trees, specifying the type of regeneration-harvest (clear cut, seed tree, shelter wood, or selection regeneration systems as applicable).
5. Regeneration Technique--Should include a sound proposed regeneration plan for each stand when harvest of final crop trees is done. Specify intent to naturally regenerate or plant trees.

NOTE: Forest management plans can and should be updated as forest conditions significantly change (e.g. change in product class mix as the stand ages and grows, storm damage, insect or disease attack, timber harvest, thinning, wildfire). The county will audit plans periodically and, to remain eligible for use-value treatment, the plan must be implemented.

Part 4. Affirmation

AFFIRMATION OF APPLICANT—I (we) the undersigned declare under penalties of law that this application and any attachments hereto have been examined by me (us) and to the best of my (our) knowledge and belief are true and correct. In addition, I (we) fully understand that an ineligible transfer of the property or failure to keep the property actively engaged in commercial production under a sound management program will result in the loss of eligibility. I (we) fully understand that loss of eligibility will result in removal from the program and the immediate billing of deferred taxes.

Christa L. Mills

Signature of Owner (All tenants of a tenancy in common must sign.)

President

Title

12-30-15

Date

Signature of Owner (All tenants of a tenancy in common must sign.)

Title

Date

Signature of Owner (All tenants of a tenancy in common must sign.)

Title

Date

Part 5. Continued Use *(Complete only if the property is currently in Present-Use Value and you are applying for immediate eligibility under the Continued Use exception. See G.S. 105-277.3(b2)(1) for full details.)*

- I certify:
1. The property is currently in Present-Use Value.
 2. I intend to continue the current use of the land under which it currently qualifies.
 3. I understand I will be responsible for all deferred taxes due because of any disqualification.
 4. I ACCEPT FULL LIABILITY FOR ANY EXISTING DEFERRED TAXES.

Note: If the property is currently in Present-Use Value and liability is not accepted, the full amount of the deferred taxes will typically be due in the name of the grantor immediately. Liability need not be accepted and no deferred taxes are due for qualifying transfers pursuant to G.S. 105-277.3(b) and (b1). For example, liability does not need to be accepted for qualifying transfers to relatives. However, any deferred taxes existing at the time of transfer will remain a lien on the property. Owners already receiving Present-Use Value on properties not included in this application may wish to review the alternative provisions of G.S. 105-277.3(b2)(2).

Christa L. Mills

Signature of Owner (All tenants of a tenancy in common must sign.)

President

Title

12-30-15

Date

Signature of Owner (All tenants of a tenancy in common must sign.)

Title

Date

Signature of Owner (All tenants of a tenancy in common must sign.)

Title

Date

FOR OFFICE USE ONLY: ☐ APPROVED ☐ DENIED BY: _____ REASON FOR DENIAL: _____

EXHIBIT F

Sondra Ipock Riggs
Jones County Commissioner
March 3, 2016

To The Editor,

Jones County has made much needed improvements to the Historic Agricultural Building until in the early 1930's. During the physical year 2016 we as Jones County Commissioners used our Jones County Building Improvement Fund to spend around \$70,000 to correct some environmental concerns that we had in the building, which contained mold. We also made certain improvements required by ADA. Our intentions are to have a space available for the Farm Service Agency and Natural Resource Conservation Service. So that these much needed resource agencies can once again be in Jones County to assist the strong and important farming. Farmers today have to go to other counties to fill out reports and other paperwork. We are also now using the meeting space at the Ag Building to hold our County Commissioners meetings. It can also be used for other concerns as the office is needed. For example we will be

using it for the courts in case the courts overlap as we have in the past. It would have been a greater expense to tear down and build a new building for these purposes. Jones County has also been fortunate to build up an Economic Development Loan Fund to work with businesses that meet certain criteria for assistance. We are able with the Committee of 100 and Economic Development Board to use funds towards projects that we think will bring jobs to Jones County. This is a "Revolving Loan Fund," which means that when it is paid back we are able to use it for future projects. With this fund in place there has NEVER been any Jones County Tax Dollars spent on Economic Development and Committee of 100. We have built this fund up with State and Federal grants and projects that have been successful in Jones County for over 30 years. Some projects have had failed, but we must continue to build new projects and go forward not backward. There are very FEW counties that have such a fund in place. This is astronomical for Jones County!

It is important for some people to spread incorrect information without the full story!

Thank you for allowing me as your Jones County
Commissioner

Sondra Ipock Riggs

862 Riggstown Road

Pollocksville, NC 28573

(252) 224-7431 (house)

(252) 670-8263 (cell)

March 21, 2016 7:00 P.M.

JONES COUNTY BOARD OF COMMISSIONERS

REGULAR MEETING

JONES COUNTY AGRICULTURAL BUILDING, 110 MARKET STREET

TRENTON, NC 28585

MINUTES

COMMISSIONERS PRESENT:

Zack Koonce, Chairperson
Frank Emory, Vice-Chairperson
Joseph Wiggins, Commissioner
Sondra Ipock-Riggs, Commissioner

OFFICIALS PRESENT:

Franky J. Howard, County Manager
Angelica Hall, Clerk

COMMISSIONERS ABSENT:

Mike Haddock, Commissioner

The Chairperson called the meeting to order. Chairperson Zack Koonce gave the invocation.

MOTION was made by Commissioner Joseph Wiggins, seconded by Commissioner Sondra Ipock-Riggs, and unanimously carried **THAT** the agenda be **APPROVED** as presented.

MOTION made by Commissioner Joseph Wiggins, seconded by Commissioner Sondra Ipock-Riggs, and unanimously carried **THAT** the minutes for Regular Meeting on February 15, 2016 be **APPROVED**.

PUBLIC COMMENT PERIOD:

No Public Comment

1. REVISED CHILD HEALTH FEES

Mr. Wesley Smith, Health Director, provided the Board with an updated Fee Schedule. The revised Child Health Fee schedule included comparison from Pamlico and Green County. The base line is the Medicaid rate and most are increased by 25%. Mr. Smith also explained to the Board that the Health Department uses a sliding fee schedule which also provides assistance to clients to reduce their rate at the time of visit. **MOTION** made by Commissioner Frank Emory, seconded by Commissioner Sondra Ipock-Riggs and unanimously carried **THAT** the revised Health Department Fee Schedule be **APPROVED**. A copy of the revised child health fee schedule is marked **EXHIBIT A** and is hereby incorporated and made a part of the minutes.

2. CAPITAL REQUEST

Mr. Wesley Smith, Health Director, submitted a capital request to the Board. The Health Department recently received a Public Health grant for preparedness and readiness for Ebola Virus Disease. Mr. Smith explained to the Board that they have funding to cover the request of 4 Micosoft Pro Tablets. This purchase will not include any county funds. **MOTION** made by Commissioner Joseph Wiggins, seconded by Commissioner Frank Emory and unanimously carried **THAT** the capital request be **APPROVED**. A copy of this request is marked **EXHIBIT B** and is hereby incorporated and made a part of the minutes.